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# **CHAPTER 2: Site Staffing**

**Policy:** 

Each site shall be organized and staffed to carry out the requirements of the Program. Certain staff functions, responsibilities and qualifications must be met to fulfill the program's assurances to the Centers for Medicare & Medicaid Services (CMS) that safeguards have been taken to protect the health and welfare of the clients. Failure to meet these assurances could result in recovery of funds. Modifications to the staffing pattern or staff qualifications require written CDA approval prior to implementation.

**Purpose:** The staff qualifications outlined in this chapter are the minimum

requirements.

#### **References:**

 Home- and Community-Based Services Waiver #0141.R04.00.

CDA Standard Agreement (Site Contract).

## 2.000 MSSP Staff

# 2.010 Minimum Qualifications

The following qualifications apply to staff employed by the sites as well as to the providers of purchased specialist care management services (Section 3.1430, 4.3 Purchased Care Management). Sites must demonstrate recruitment efforts for staff meeting the minimum qualifications. If these efforts prove unsuccessful, the site may then submit a written request to CDA for an exemption to the staffing plan or staff qualifications.

#### 2.010.1 Site Director

Bachelor's degree in administration, a health or human services specialty or related field, and four years of responsible managerial or administrative experience in health or human services. Demonstrated expertise and ability to perform all responsibilities associated with program operations (Section 2.020.1 Site Director).

# 2.010.2 Supervising Care Manager (SCM)

Master's degree in social work, nursing, psychology, counseling, gerontology, sociology, or rehabilitation and two years experience working directly with the elderly. Demonstrated expertise and ability as a care manager, as evidenced by experience successfully carrying out these job duties and ability to supervise and train staff.

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# 2.010.3 Social Work Care Manager (SWCM)

Bachelor's degree in social work, psychology, counseling, rehabilitation, gerontology, sociology, or related field, plus two years of experience working with the elderly.

# 2.010.4 Nurse Care Manager (NCM)

California Department of Consumer Affairs Board of Registered Nursing license that is current and in good standing, plus one year experience.

# 2.010.5 Care Manager Aide (CMA)

Two years of experience working with the elderly or a Bachelor's degree in a human services discipline.

# 2.020 Functions and Responsibilities

## 2.020.1 Site Director

The Site Director has overall responsibility for the operation of the local MSSP site. The Site Director shall:

- Plan, organize, and direct all administrative and program activities related to the contract with CDA, and resolve all issues of difference between the contract host agency and CDA.
- Administer the site in accordance with the contract with CDA, this Site Manual and policy directives issued by CDA.
- Define lines of authority and develop the roles and parameters of responsibility for site staff to ensure clear lines of responsibility, equitable workloads and adequate supervision.
- Recruit, employ, and train qualified employees. Terminate employment of employees who perform in an unsatisfactory manner.

# 2.020.2 Supervising Care Manager (SCM)

Under the direction of the Site Director, the SCM is responsible for planning, organizing, developing, and implementing the principles and techniques employed in a comprehensive care management model for the frail elderly. The SCM position combines both administrative duties and clinical supervision responsibilities. While both areas have to be balanced, it is important that the time required for direct clinical supervision of care managers not be eroded by administrative functions.

The position's primary responsibilities are the ongoing supervision of care management staff, the review and approval of all client care plans, and client cost monitoring. Specific responsibilities include:

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- Supervise the Social Work Care Managers (SWCM), Nurse Care Managers (NCM), Care Manager Aides (CMA) (where utilized), and care management support staff.
- Provide on-going/periodic in-service training for all staff.
- Resolve provider/client problems.
- Review program operations both within the host agency and the community, and identify and recommend changes to improve service accessibility for clients.
- Recommend policy changes.
- Establish and maintain effective working relationships with public and private agencies providing services to clients.

# 2.020.3 Social Work Care Manager (SWCM)

The SWCM must evaluate the potential client as a total person and identify the functional limitations that impede independent living. This position is responsible for the following activities:

- Conduct in-depth assessments and reassessments covering psychosocial, rehabilitation, and environmental concerns.
- Refer clients to special consultants to provide detailed evaluations and recommendations to improve the client's functional level.
- Consult with the NCM.
- Collaborate in the development of the care plan.
- Coordinate services identified on the care plan.
- Conduct follow up and monitoring of client's needs and care plan.
- Identify and develop support systems for the client.
- Case recording and reporting.

# 2.020.4 Nurse Care Manager (NCM)

The NCM must evaluate the potential client as a total person and identify the functional and health limitations that impede independent living. The NCM is responsible for the following activities:

- Conduct in-depth assessments and/or reassessments covering medical, health, and rehabilitation concerns.
- Certify level of care determinations.
- Perform physical assessments as necessary and interpret clinical findings.
- Work with physicians and other health professionals.
- Consult with the SWCM.
- Collaborate in the development of the in care plan.
- Implement the services detailed in the care plan.
- Conduct follow-up and monitoring of client's needs and care plan.
- Identify and develop support systems for the client.
- Case recording and reporting.

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# 2.020.5 Care Manager Aide (CMA)

Under the direction of the SCM, SWCM or NCM, the CMA may assume responsibility for conducting the initial intake/screen on potential MSSP clients, including: completing an intake form; identifying issues that may lead to crises and making appropriate referrals; providing information and referral for those applicants ineligible for the program; and assisting the client in understanding and signing the Application Form. Under the supervision of the SCM, SWCM or NCM, the CMA may assist in: coordinating client contacts; participating in the case conference and care plan development; monitoring client well-being and/or contacting family; verifying services and case recording. The CMA does not conduct re/assessments or sign-off on the care plan.

# 2.030 Requesting an Exemption to Minimum Qualifications for Care Management Staff

If efforts to recruit qualified applicants for a care management staff vacancy have been unsuccessful, the site may request an exemption to hire a candidate who does not meet the minimum qualifications for education and/or experience. This request must be made in writing and approved by CDA **prior** to making a commitment to hire.

# 2.030.1 Prerequisites for an Exemption

All of the following expectations must be met in order for CDA to consider the request for exemption:

- The site must have a history of compliance with program standards in identifying, addressing and monitoring the psychosocial, health and safety issues of clients as identified in past UR findings. For NCM exemptions, there must also be a history of appropriate level of care determinations.
- The site's timeliness of program compliance and documentation of casework processes must demonstrate compliance with federal waiver requirements and MSSP guidelines.
- The site utilizes an effective care management staffing model which would provide training opportunities and support to the employee receiving the exemption.

A site must first demonstrate and submit evidence of:

 Continuous advertisement for at least seven (7) days. Advertisements may be in a variety of media, e.g., local and surrounding area news-

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papers (if rural, a major newspaper of closest proximity); internet listings and websites; appropriate professional journals.

 Outreach to appropriate institutions of higher education and professional organizations (e.g., nursing, social work).

# 2.030.2 Procedure for Requesting an Exemption

A written request to CDA for exemption of the educational, experience or certification requirement must be submitted by the site **prior** to making a commitment to hire an individual who does not meet the minimum qualifications. The request must include all of the following:

- The candidate's resume.
- The appropriate Criteria Rating Sheet, if applicable (Appendix 41).
- Documentation detailing the recruitment process (e.g., advertisement, mailings, organizational contacts), covering at least a 7-day period.
- A written plan that addresses mentoring, supervision and oversight of the employee for whom the exemption is being requested. The plan must address all of the following:
  - 1. The candidate's ability to perform all duties outlined in this Site Manual.
  - 2. Plans for training and development activities that address the core competencies listed on the appropriate Training and Development Pathway (NCM, SWCM, or SCM) (Appendix 41). As a supplement to site-developed materials, sites may also use the Orientation Checklist (Appendix 41), as a guide to ensure that the NCM, SWCM or SCM is oriented to all duties.
  - 3. Time frames for accomplishing the goals (all required training and development activities).

## 2.030.3 CDA Process

CDA will provide a response acknowledging receipt of the request of the staff exemption. A final determination will be sent to the site within ten working days once the review of the request and supporting documents is complete.

# 2.030.4 Duration of Exemption

Once granted, the exemption will remain in effect as long as the site assures the candidate's competency in performing all care management activities and job duties. The exempted employee will be listed on the Quarterly Report form (Part F – Site Staff Qualifications and Exemptions). After the employee has completed all training and development activities outlined in

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the exemption request, they no longer need to be listed in the exemption section of the Quarterly Report form. If at any time the exempted employee does not demonstrate competency in performing their duties as determined by the supervisor or utilization review (UR) findings, the site must develop and implement a plan of corrective action immediately.

CDA retains the right to rescind an exemption at any time UR or other program review findings demonstrate that the exempted employee has not provided care management services in compliance with minimum program standards.

## 2.100 Unpaid Staff

## 2.100.1 Student Interns

Although not a funded staff position under the MSSP contract, many sites have offered graduate and undergraduate student internship assignments in collaboration with local institutions of higher education. Student interns doing casework must be supervised directly by either the MSSP Supervisor, or the Social Work or Nurse Care Manager. The supervising staff person must countersign any casework documented by an intern. Student interns doing casework will use the two-digit staff number of the primary Care Manager (CM) assigned to the particular case (Section 7.550, Site Staff Codes).

Student interns in administrative assignments will be supervised by staff consistent with their field placement.

#### 2.100.2 Volunteers

Volunteers may be utilized in a variety of positions. Assignments should be commensurate with the educational level and demonstrated skills and abilities of the individual volunteer. Successful utilization of a volunteer is dependent upon the ability of site staff to provide adequate supervision and oversight. The supervising staff person must countersign any casework documented by a volunteer.

## 2.200 Administrative Staff

Qualifications for experience and education of administrative staff are established at site discretion.

#### 2.300 Caseload Ratio

MSSP operates with a caseload ratio of 40 clients to one care manager (40:1). The acceptable range for the ratio is 38:1 to 42:1. Sites are not allowed to permanently operate at a different caseload ratio without prior approval from CDA.

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CDA recognizes that there are normal fluctuations in monthly caseload counts and that temporary events may result in varying ratios for a short period of time.

The ratio is computed by counting all care management (CM) staff positions, and dividing that number into the active client slots. Care management staff includes social workers, nurses and case aides (when performing care management functions). For an individual that performs both care management and care management support duties, only the percentage of time assigned to care management duties is calculated into the ratio. The SCM is included in the ratio <u>only</u> if carrying cases for longer than six months. Care management positions funded by other resources must also be included in the ratio.

For example, at a site with 3 social workers and 1 nurse (a total of 4 care management staff) serving 160 active clients, the ratio would be 40:1. The ratio would remain 40:1 if the site employed 3 social workers and 2 half-time nurses. Although this model represents 5 care management staff, the full time equivalent (FTE) totals 4. If the caseload at a site with 4 care managers dropped to 152 however, the ratio would become 38:1.

The site's organizational chart, which is submitted with the Exhibit B Budget each Fiscal Year, should align with the positions on the budget as well as include the positions critical to the MSSP program that are funded through other funding streams. The Quarterly Report (Part B Site Staffing) tracks the site's staffing through the year and automatically calculates the ratio based on data that is being reported. The Quarterly Report also provides a section for **comments** to allow for expanded explanation should changes occur.